

CITY OF CRETE APPLICATION FOR SPECIAL EVENT PERMIT

NAME OF EVENT

Date of Event	DO NOT WRITE IN THIS SPACE
	Application #
Start Time of Event	Public Works Review
Finish Time of Event	E Davis
Location of Event	Emergency Services Review
	City Administrator Review
	Council Meeting Date
	Approved
☐ This request is for temporary occupation of the street or sidewalk right-of-way.	Denied
Streets or Alleys requesting to be closed	Insurance Certificate
	Required
	Ins. Cert. Received
	Conditions listed on back
Special Equipment	
Organization	
Responsible Party	
Address	
Phone	

Signature of Responsible Party

□ Diagram (or print of location of event.
☐ If alcohol	ic liquor will be served, copy of SDL.
	ic liquor will be served, description of barricades, devices, security measure e compliance with The Nebraska Liquor Control Act:
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